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Bib Data Sheet

CONFIRMATION NO. 1018

<b>SERIAL NUMBER</b> 09/689,994	<b>FILING DATE</b> 10/13/2000 <b>RULE</b>	<b>CLASS</b> 426	<b>GROUP ART UNIT</b> 1761	<b>ATTORNEY DOCKET NO.</b> 11936.5US11
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF 09/419,438 10/15/1999 *OK, N*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None, N*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* 11/24/2000**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 31	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 8
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**ADDRESS**  
23552

**TITLE**  
Enhanced fiber additive; and use

<b>FILING FEE RECEIVED</b> 1240	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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